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EXHIBIT 3

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HB 325

February 4, 2009

Representative Arlene Becker, Chair House Human Services Committee Montana State House of Representatives PO Box 200400 Helena, MT 59620-0400

Madam Chair and Members of the Committee:

For the record, my name is Rita McDonald, representing Ashland Community Health Center. I would like to be listed on the record as a supporter of HB325 with the bill sponsor's recommended amendments.

Seven years ago in January I began to have some rather severe symptoms including stomach aches, blood in my stool and a general loss of energy. At age 62 I was in excellent shape having lost 90 pounds, eating a healthy diet and walking up to 3 miles a day therefore getting plenty of exercise. I was in the best physical shape; maybe in my entire life. I had no clue I was supposed to begin screening for colorectal cancer at age 50 though I had become vigilant about my Pap and Mammogram screenings. However, when the symptoms persisted, I made an appointment and went to see my doctor. As I was coming out of the anesthetic the doctor was there along with my husband. The doctor told us that he had discovered a polyp. When I ask him if he had removed it he said no because it was extensive and he suspected cancer. He then told us he would send the biopsy in to be read but he wanted us to make arrangements with a surgeon, immediately. Within a very few days I was in surgery for colorectal cancer. The surgeon came out and spoke to my family after the surgery and told them that the cancer had penetrated the wall of the colon and he had to remove 14 inches of my colon and several lymph nodes on either side of the cancer that had already become infected with the cancer. Therefore he now had to call my cancer a stage 3 which in essence meant my chances of survival had fallen from 90% to 10%. I also awoke to a colostomy bag that I had to live with for 10 months. Thus began a nightmare that has lasted for 7 years.

About the second day after surgery I had a visit from an Oncologist and he presented me with a couple of options. He told me that there was a prescribed treatment for my situation or I could enter into Clinical Trials. I opted for the treatment. He then told me they would hit me pretty hard with the treatment because I was in good physical condition except for the cancer. Briefly, my treatment went like this-

3 weeks to recover from the surgery

4 weeks of chemo every day

3 weeks off

Insert a port into my chest whereby I would receive chemo through a pump 24-7 for 6 weeks along with 6 weeks of radiation.

3 weeks off

2

4 more weeks of chemo every day

Somewhere in the middle of all the treatments my Oncologist suggested we attend a seminar he and 3 other Oncologists were presenting that afternoon. We of course stayed. The biggest thing I heard them say was "If everyone starting at age 50 would be screened with a colonoscopy colon cancer would essentially be eliminated." Imagine for a minute the thoughts that were going through my head. I can honestly say that I felt utter and complete despair at that moment. All that I had been through and all I would go through in the future, (however long that would be) could have been eliminated with a colonoscopy at age 50. I certainly would have some questions for my provider on my next visit.

Did I mention that we live on a ranch 100 miles from Billings?? My husband, family and friends drove me all of those weeks to and from Billings. We may have been able to find a place to stay during the treatments but the best way I can explain not doing that is home was my safe haven and I needed to be there to keep hope alive.

It has been 7 years since the colon cancer was discovered. In that 7 years I have had many, many hospital stays because of blockages in my small intestine. I have also had 2 surgeries in which they cut out the damaged intestine which was caused by the radiation and scar tissue from the surgery. As a matter of fact, my last surgery was 3 weeks ago.

In conclusion, when I questioned my doctor as to why I wasn't made aware of the need for a colonoscopy this was the answer. "Colonoscopy's are expensive, most people can't afford them and their insurance won't pay for prevention and early detection." My insurance did pay most of the treatment costs but I just finished paying off what they didn't pay a few months ago. The treatment cost to date for my colorectal cancer is now over a quarter of a million dollars.

Thank you for your consideration of HB325.

Respectfully Submitted,

Rita McDonald

Prevention Coordinator

Ashland Community Health Center

Ashland, MT

the cost of a human life? It is more costly to pay for treatment in later stages of cancer. What of the loss of the person? A spouse? A child? A grandparent;, an aunt or uncle, A friend.

I urge you to pass HB 325 with a do pass. Early detection, early screenings, that are paid for by insurance will save Montanans lives. Please don't let another Montanan find out that they have colon cancer and that it is a stage 3 or 4. Don't put another person or family through this agony when a simple diagnostic test is available and will save lives.

Yours truly,

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Committee on Human Services February 6, 2009

Testimony on HB325

Madam Chair and Members of the Committee;

For the record, my name is Lois Fitzpatrick and I stand in support of HB 325 Assured coverage of colon cancer screening sponsored by Rep. Diane Sands. I am a legislative volunteer for the American Cancer Society and also a member of the Montana Cancer Control Coalition. However, I am not here representing either organization. I am here as a 14 year breast cancer survivor. I am here to speak for those who could not come to this hearing due to being so ill from treatment and the disease or from having lost their fight.

I will never forget the day that the doctor told me that I had cancer. I felt as if a cannon ball went through the middle of my body, where my heart and lungs reside. I don't care what kind of cancer is diagnosed, breast, lung or colon rectal. The result is the same – devastating. Devastating to the person and their family and friends.

Breast cancer has diagnostic tests that insurance companies allow. It is easier to discover breast cancer. A lump appears, skin changes, mammograms, self breast exams, and clinical exams are things that a woman or man can do to make sure that if cancer forms, it is caught at an early stage.

What do we have for colon rectal cancer? A colonoscopy. However, most insurance companies will not cover this diagnostic test. It is not as if a doctor or a patient can examine the colon by feeling the body. Most colon rectal cancers are stage 3 or 4 when they are discovered. These late stage cancers are difficult to treat and survival rate is 10%. If colon rectal cancer is found in the early stages 1 or 2, the survival rate is 90%.

Many people put off having colonoscopies because of the fear, the fear of the test and what if something is found. I believe that most put off the colonoscopy because of cost and lack of insurance support. I saved in my medical flex account at work for one year so that I could pay my co-pay for my colonoscopy. It found 3 polyps that were benign. My husband had his colonoscopy a couple of months ago. They found 2 polyps, one was at the appendix area. Our doctor told us that without the removal of that polyp, my husband could have had colon cancer that would have been very hard to diagnose and most likely would be a stage 3/4 when symptoms might have occurred.

You may hear from opponents that in order to cover the cost of colonoscopies that the cost of all health insurance will increase significantly. I ask you what is

Testimony in support of HOUSE BILL NO. 325

Madame Chairperson, members of the committee. For the record, my name is Rosalie Walsh. I live in Helena. I stand in support of this bill as a private citizen and care giver.

When I was asked to testify, I was asked to put a human face on this cancer. That face is the face of my dear mother who died 10 years ago of metastasized colon cancer.

Prior to her illness, my mother had more energy as a 70 something person than most 35 year olds. She did <u>all</u> of the right things to take care of herself—ate healthy, exercised, kept her mind alert by learning new things; she was very active and engaged in life. She herself was a health care professional, and she contributed to the Butte and Montana communities in ways that were not insignificant. She served on boards of directors for non-profits and she did a lot on her own—she made a difference in the lives of very many.

Prior to a correct diagnosis, for a period of approximately 16 months, my mother went repeatedly to the doctor and was diagnosed with many other ailments—flu, given prescriptions and sent home. At one point she had gall bladder surgery—after which none of her symptoms abated. Finally, she was given the right test that detected the cancer but by that time it had progressed so far—stage 3— that her chances of recovery were a lot less than they would have been had she been diagnosed in the early stages.

She suffered terribly and for a long time; she lingered. Her last hours of life were spent in agonizing pain, because her then diseased liver could not metabolize the pain medication. I believe all of this could have been avoided with early detection.

In that 16 months prior to a correct diagnosis, she had a surgery that I believe was unnecessary and all of that cost health care dollars—all of that it cost the <u>insurance</u> company health care dollars. So when people argue that giving early detection tests for colon cancer is cost prohibitive, my argument would be that it is not. I believe that in my family's experience, had my mother's cancer been detected early, it would have <u>saved</u> a lot of health care dollars. I only mention that because I think money is an argument that opponents to this bill will put forth. But what's *really* most important to me, my family, and all of the people that still grieve the loss of this wonderful woman is that this was a human life.

We hear a lot of rhetoric *about t*he value of human life. This bill is an example of where the rubber meets the road. If human life <u>is</u> important—really—then we will pass laws that protect the quality of life. We all have families; this story can be anyone's story. Cancer is non discriminatory. Anyone can get it. So, this issue affects everyone's family.

So I hope you, as our elected officials, will do the *right* thing and spare other families from similar experiences.

Thank you to the committee, and especially thank you Representative Sands for bringing this bill forward.